

# Bias in the mirror

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# VALORISATION

## Social and Economic Relevance

Accreditation standards and legal, regulatory and policy requirements in countries such as the United States and Canada now require organizations and groups to address inequalities related to gender, race, sexual minorities and immigrant/newcomers in the workplace. Over the past several decades, diversity training has become increasingly commonplace<sup>1</sup>, as paradigms shift and traditional cultural competence programs lose their relevance<sup>2</sup>.

In recent years, an increasing number of organizations are seeking to address the issue of implicit bias. In the Spring of 2018, Starbucks Coffee Company announced it would be closing its stores for mandatory implicit bias training for its employees. During this time, the topic of implicit bias had entered mainstream dialogue including the popular media. During the heightened period of coverage, I wrote a newspaper article entitled, “Starbucks and the Impact of Implicit Bias Training,” that was shared widely through several popular media outlets including the Canadian National Newspaper, The National Post. I was also interviewed by radio stations across Canada including a national radio show called, “The Current,” as well as Canadian Broadcasting Corporation Radio programs in London Ontario, Toronto Ontario, Cape Breton Nova Scotia, Thunder Bay Ontario, Winnipeg Manitoba, Saskatoon, Saskatchewan Edmonton Alberta, Calgary Alberta, and Kamloops British Columbia.

Earlier this year, I was sought for my expertise in implicit bias education to participate in the governance board of the local police service in London, Ontario, Canada. This opportunity emphasizes the importance of implicit bias training in the police services sector, and provides an example of the broad social and economic relevance of my research.

Overall, the findings from this thesis may be used to improve diversity training programs across sectors and contexts. The integrated theory of implicit bias recognition and management described in chapter 8 provides guidance to curriculum developers and consulting companies on important components of implicit bias training.

## Target Groups

While this thesis is relevant in several different settings outside of health professions educators, there are several target groups that may be interested in the products of this work such as diversity professionals and mental illness stigma researchers. Diversity professionals include consulting agencies and corporate training companies which seek to address issues related to diversity and inclusion, while

mental illness stigma researchers focus on promoting and evaluating initiative to reduce stigmatizing attitudes towards individuals with mental illness.

## **Innovation**

Previous research on implicit bias recognition and management describes how to facilitate a process of recognizing and managing implicit biases that may perpetuate disparities. The findings of this thesis are innovative because they introduce the dilemma: how do we break bias without breaking ourselves? We suggest that merely teaching and learning about the topic of implicit bias is not enough to address the issue of implicit biases and how they adversely influence equity. Our research emphasizes that when teaching and learning about implicit bias, personal and professional intertwine. We propose that addressing implicit bias involves deeply emotional, personal and vulnerable processes for learners. These findings are important to faculty developers as well as educators across the health professions education continuum.

Our work suggests that within a health professions context, integrating implicit bias recognition and management curricula into existing diversity curricula must address the unintended consequences of learner wellness. As we argue in chapter 4, health professionals often view exhibiting bias and demonstrating stereotyping as antithetical to the values that comprise the “idealized” health professional<sup>3-4</sup>. If educational programs encourage health professionals to become aware of their biases, chapter 7 emphasizes that frustration and confusion accompany such new-found awareness. The resulting self-doubt and emotional reactions described by our participants underscores the importance of role-modeling vulnerability and ensuring a safe learning environment.

## **Activities and Products**

The work of this thesis has been applied and translated into an implicit bias recognition and management curriculum. The learning materials in the curriculum include brief lectures as well as a 4-hour-workshop. Various aspects of the curriculum have been delivered locally throughout London Health Sciences Centre, in London, Ontario Canada, as well as National and Internationally. There have been requests from the Mental Health Commission of Canada to consider the applicability of this work towards national initiatives on reducing mental illness stigma. Additionally, London Health Sciences Centre has embedded training materials into corporate nursing orientation, demonstrating a sustainable impact of this work on organizational learning. Requests have come in from other settings including adult medicine and addictions services to adapt this curriculum for use in relation to addictions stigma.

In June 2018, funding was secured from Associated Medical Services Foundation to adapt the curriculum into the digital realm. In collaboration with a local organization (mindyourmind.ca) with expertise in digital initiatives to improve youth mental health, the findings from my research is informing the design of online modules for youth with lived experience of mental illness and for health professions students to reduce the adverse impact of mental illness stigma, and improve patient outcomes.

### **Additional Knowledge Dissemination Activities**

#### **Invited Lectures**

I have been invited to lecture on the products of this thesis at Central Michigan University in Michigan, U.S.A. I have also spoken at Ben-Gurion University in Beersheva Israel, at the Health Equity Forum at Georgetown University in Washington, D.C., and was an invited speaker on the topic of implicit bias and wellness at the National Academy of Medicine.

#### **National and International Presentations**

Workshops and oral presentations have included the Research Symposium of the Arnold P. Gold Foundation, Canadian Conference on Medical Education, and Canadian Academy of Child and Adolescent Psychiatry, Rogano Meeting and Association for Medical Education in Europe Conference. Several presentations have also taken place through the Association of American Medical Conferences including several at Annual Meetings (2015, 2016) and at Professional Development Conferences (2016, 2017, 2018).

#### **Local Presentations**

Locally, I have presented several times at scientific meetings within London, Ontario. For example, at the Centre for Education Research and Innovation Annual Symposium at Western University in 2016 and 2017. Also at the Schulich School of Medicine and Dentistry annual Distributed Education Conference, and Department of Psychiatry Division of Child and Adolescent Psychiatry Research Conference, where our poster won the prize for “Best Poster” in 2017.

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